

obstruent method, admitted by the older writers. It does not consist merely in the administration of agents, which resolve inspissated and obstructed humours chemically or mechanically, but which act on the humours through the soft parts. Now, the conditions, he tells us, that may give rise to such obstruction, are numerous; sometimes they consist in debility and relaxation of the solids; at others in augmented sensibility, and a spasmodic condition; at others they are connected with dyscrasy, dependent on syphilis or gout; whilst at others, again, there may be inflammation present, (p. 95.) Of course, the treatment has to be regulated according to the precise pathological state, which is presumed to give occasion to this supposititious disorder in the course of the humours. Amongst the resolvents adapted for augmenting the activity of the vessels, we have such drugs as the *Radix graminis*, *Beccabunga*, *Saponaria*, *Fumaria*, &c. recommended; precisely in the same manner as the most inert and irrational articles were proposed one hundred years ago, for fancied pathological derangements of the humours, and on not a whit more foundation.

There are many other points in the work of M. Conradi, with which it would be difficult for us to accord; but what we have already observed, will sufficiently exhibit the general character of the production. It may be well adapted to accompany his lectures; but it is manifestly not calculated to enable the young therapeutical inquirer to derive accurate information on a branch of medical science, which is daily becoming more and more demonstrative. Had it made its appearance in the middle of the last century, it might have depicted tolerably well the existing knowledge of, and manner of elucidating the subject; but it is totally unfit for the present era, at least in this meridian, for which, by the way, it was not intended. It is only to be regretted, that it cannot be looked upon as adapted at this day to any meridian.

R. D.

XVI. *Researches on some points of the History of Chorea in Children.* By M. Rufz, Resident Physician at the Hospital for Children, at Paris. From the Archives Générales, February, 1834.

This essay is based upon the registers of the Hospital for Children at Paris, and on the private observations of the author, who was house physician during two years at that institution. Chorea is one of the very few diseases in which an error in diagnosis is scarcely practicable, from the obvious and distinct symptoms, which are unlike those observed in any other affection; hence, the registers of the Children's Hospital are sufficient to establish the relative frequency of cholera in the two sexes, and its occurrence at different seasons of the year, and at different periods of childhood. M. Rufz has examined other points relative to the history of chorea, which could not be ascertained from the registers of the hospital, but which were deduced from his personal observations.—To the talent and accuracy of M. Rufz as an observer, we can bear the highest testimony, from a long acquaintance, formed while prosecuting similar researches in other wards of the same hospital, and we are peculiarly gratified that he has ascertained, in a clear matter of fact manner, so many points in the natural history of chorea.

In the Children's Hospital at Paris, are received a large proportion of the children of the poorer inhabitants, between the ages of two and fifteen years.

The diseases are both acute and chronic, and are so numerous that the relative frequency of any affection can be easily ascertained. M. Rufz has examined the registers of the hospital for ten years, ending with 1830. The whole number of children admitted during these ten years was 32,976; of whom, 17,213 were boys, and 15,763 girls. Of these patients, 189 were affected with chorea, so that the proportion of the disease, compared with that of all other affections of childhood, is one in 174½ nearly; the affection is unfrequent, therefore, though not extremely rare. Of the 189 cases, 51 occurred in boys, and 138 in girls. By comparing these last two numbers with the whole number of boys and of girls respectively, we find that one girl in 114, and one boy in 337, (exclusive of fractions,) was admitted with chorea—that is, that chorea is nearly three times as frequent in the female as in the male sex.* Chorea is rare before the age of six years; thus, of the cases of chorea there were—

From two to six years, 5 boys and 5 girls.
“ six to ten “ 16 “ 45
“ ten to fifteen 30 “ 88

The number of children, between the ages of two and ten years, was 71, and between the ages of ten and fifteen, 118; and as the first period includes eight years, and the latter only five, the proportionate frequency of chorea in the eight years of life, included between the ages of two and ten, is to that in the subsequent five years as one to two and two-thirds nearly. If, instead of including children below the ages of six years in our calculation, we examine the relative frequency in the four years between the ages of six and ten years, and in the five years from ten to fifteen, we find, (making the same proportionate calculation,) that the frequency in the first period is as one to one and a half, nearly. We therefore see that chorea is rare before the age of six years, that it is not unfrequent between the ages of six and ten, but usually occurs between the ages of ten and fifteen; the same proportions are true as to both sexes. The frequency of chorea in the latter years of childhood is even greater than the preceding calculation shows, on account of a fact which M. Rufz has not distinctly stated; that is, the number of children received at the hospital is less between the ages of ten and fifteen than in any period of five years before the age of ten. This we know, from our own observations.

Chorea seems rather more frequent in the summer than in the winter months, although the registers of the Children's Hospital show but little difference in this respect. M. Rufz has found that in eleven, out of eighteen patients, the origin of the chorea was ascribed to a sudden terror with which the children were seized. In some of these eleven cases, the influence of fear seemed direct and immediate; in the others it was doubtful. In eighteen cases, he found that neither the father nor mother of the children had been affected with chorea. The influence of imitation in the production of chorea is disproved by the experience of the Children's Hospital, where, although a considerable number of patients affected with chorea are constantly placed, no such instance of propagation of the disease has been known to occur. Chorea becomes more frequent

* Some unaccountable errors have crept into M. Rufz's calculation; the proportional numbers we give, are calculated from his own data, which we know were copied directly from the registers of the hospital.

as the age of puberty is approached, but none of the patients admitted into the hospital, had attained that period.

M. Rufz has seen four cases of death supervening during the continuance of chorea, and quotes two other fatal cases—one of them on the authority of the writer of this notice. In the case which we communicated to the author, death took place from the extreme violence of the irregular movements of the whole muscular system. In none of these six cases was any appreciable lesion discovered in the cerebro-spinal organs, although they were examined with great care by persons accustomed to researches of pathological anatomy. The lesions of other organs were very various, and apparently dependent upon the accidental disease, which, in most of the cases, was the cause of death.

Treatment.—At the Children's Hospital, the physicians were in the habit of treating chorea by cold baths, tonics, &c. with success, but the cure was slow, and frequently so protracted, that it was doubtful whether the termination of the disease was not owing to the unaided efforts of nature. M. Baudelocque, one of the physicians of the hospital, introduced the use of sulphur baths, made by dissolving four ounces of sulphuret of potassa in sixteen buckets of water, (equal to about ten or twelve of the size used in this country.) A bath was given five times a week; that is as often as the arrangement of the hospital permitted it. In fourteen cases, treated by these sulphur baths, there were thirteen cures. The mean duration of their residence at the hospital was twenty-four days, while the mean duration of the patients previously to the different methods employed, was thirty-one days. A diminution of the symptoms occurred after the second or third bath, and it was rarely necessary to give more than ten or twelve. In one case the cure was complete after the fifth bath. Other trials of the sulphur bath were made by the physicians of the Children's Hospital—many of these cases I have witnessed. At the Pennsylvania Hospital, there were treated four cases of chorea, during the past summer. In three of these cases, trial was made of the sulphur baths; some difficulty existed from the want of a suitable apartment where the baths could be taken without incommoding the patients in the adjoining wards. Some baths were, however, given with manifest advantage. The *actea racemosa*, or black snakeroot, was prescribed in doses of from ten to fifteen grains, four times a day. The cases are scarcely numerous enough to appreciate the value of this remedy.

W. W. G.

XVII. *Recherches Medico-Légales sur l'Incertitude des Signes de la Mort, les Dangers des Inhumations Precipitées, les Moyens de Constatier les décès et de Rappeler à la vie ceux qui sont en état de mort Apparente.* Par M. JULIA DE FONTENELLE, Professeur de Chimie Médicale, &c. &c. &c. Paris, 1834, pp. 352, 8vo.

The subjects of Mr. Fontenelle's researches have long attracted the notice of the medical profession, and year after year works have appeared, well-calculated to direct the attention of the public to the dangers attendant on premature interments, yet whatever may have been the momentary impression produced by them, the world is still content to pursue the course which fashion or convenience has dictated; and in most civilized countries the scarcely cold remains of relatives and friends are hurried to the grave, without an attempt